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DECISION-MAKING FACTORS IN CASES OF CHILD NEGLECT

CATHERINE FOSTER ALTER

The author presents findings of an analogue study of factors that influence child protection workers' initial decision in potential cases of child neglect. Contrary to previous research findings, the subjects displayed considerable agreement in their decision making.

Although the implementation of state child protection laws has required a large financial and technological investment, criticism of the usefulness and efficiency of the present system has grown. At the heart of this criticism is a concern that families are labeled abusive or neglectful in accordance with an inadequate decision-making process.

This process involves many judgments that have significant impact upon the future of the child and family. Probably the most important decision point occurs early in the process - usually within 24 to 48 hours of the initial report. A child protection worker must investigate the report and decide whether to "substantiate" or "not substantiate" the allegations contained in the report. This quick decision, based necessarily on incomplete information, often determines the future course of action of the agency and court.

The Problem

Critics of the system cite two problems with this initial diagnostic phase. First, there exists neither a theoretical nor clinical framework to help child protection workers apply the legal standards established in their state laws (Newberger and Bourne 1978). There is, therefore, an attendant absence of interdisciplinary standards upon which to base sound judgments (Polansky et al. 1978). Because the initial decision is difficult (Nagi 1975), and because concrete criteria are lacking, workers often rely on cultural and personal biases (Brocker 1977), or make decisions based on "exhaustion, emotionalism, or personal values about child rearing" (Rosenfeld and Newberger 1977).

The second problem concerns the question of fairness. Because of the lack of consensus concerning diagnostic criteria, there is a concomitant disagreement about what factors workers should use in decision making (Rosen 1981) and inconsistency within and between jurisdictions concerning what constitutes abuse or neglect (Craft et al. 1980). In general, the literature suggests that child protective personnel work within an ambiguous context that has the potential of failing in its purpose to protect children on one hand, and the potential of unfairly applying sanctions to parents, on the other.

Review of Previous Research

A number of studies have identified factors workers use in making decisions in abuse cases (Craft et al. 1980; Rosen 1981). An analogue study has not been reported, however, that deals solely with neglect - perhaps because abuse and neglect are thought to be two poles on the same continuum.

In fact, the dynamics are quite dissimilar. Abuse is a violent action that harms the child; neglect is failure to act that harms the child. The first is a critical event; the second a pattern of behavior sustained over a long period of time.

Curiously, little empirical research has been done on neglect, given that each year two to three times more neglect reports are processed than abuse reports. The lack of empirical work may be due to the fact that, as Polansky et al. (1972, 1978) point out, the concept of neglect is an abstract one, and neglect itself is a relative state. It may be that standards must be implicit, but Polansky et al. (1978) do not believe this to be the case. In order to put into operation the concept of neglect, he and his colleagues developed the Childhood Level of Living Scale (CLL) for both rural and urban areas. Very few agencies, however, use valid instruments such as the CLL in their attempt to diagnose child neglect accurately. In the absence of explicit standards, how do workers make decisions?

Components of the Research

Theoretical Framework

The purpose of abuse and neglect Mandatory Reporting Laws is to apply legal sanctions against social behavior that is considered to deviate from the norm to an unacceptable degree. As such, the laws and their implementing system of diagnostic and treatment services must have a means of defining the boundaries between the normal and deviant. Erikson (1966) asserts that a community, by prescribing sanctions against deviant behavior, is describing its own peculiar cultural identity, expressing its unique values, and defining its behavioral boundaries. For example, industrialized communities that place high value on private property have a high volume of theft, whereas native American communities, based on communal ownership and sharing, did not even have a word for "theft." The actions of the deviant person, then, provide the point of contrast that gives the community norms their dimension and scope.

Deviant behavior in this framework is viewed as a social construct - a relative breach of social rules. The identification and diagnosis of deviancy depend therefore on certain characteristics of the deviant person and the consequences of his or her behavior. In many instances, the diagnosis does not rest solely on the behavior itself.

Labeling theory asserts that a community, if it decides to apply legal sanctions, must have a screening device that is capable of recognizing the revealing individual variables and sifting them out of a person's overall character and lifestyle. These diagnostic variables are sometimes not related to the deviant behavior itself, but are generally associated with the person's motivations, attitudes, and social class. There are, to be sure, some acts that are such an evident threat to the public welfare that the observable variables surrounding the act become the primary focus, making it unnecessary to take into account the personal characteristics of the offender. But with some categories of deviance - juvenile delinquency, mental illness, neglectful parenting - the difference between who is labeled and who is not depends upon the way the community screens for personal variables in the alleged offender's social history.

It is easy to understand why our society finds it difficult to delineate this screening process concretely. The necessary information is not easily relayed by straightforward language. More important, the values and attitude that establish the boundaries tend to shift across time.

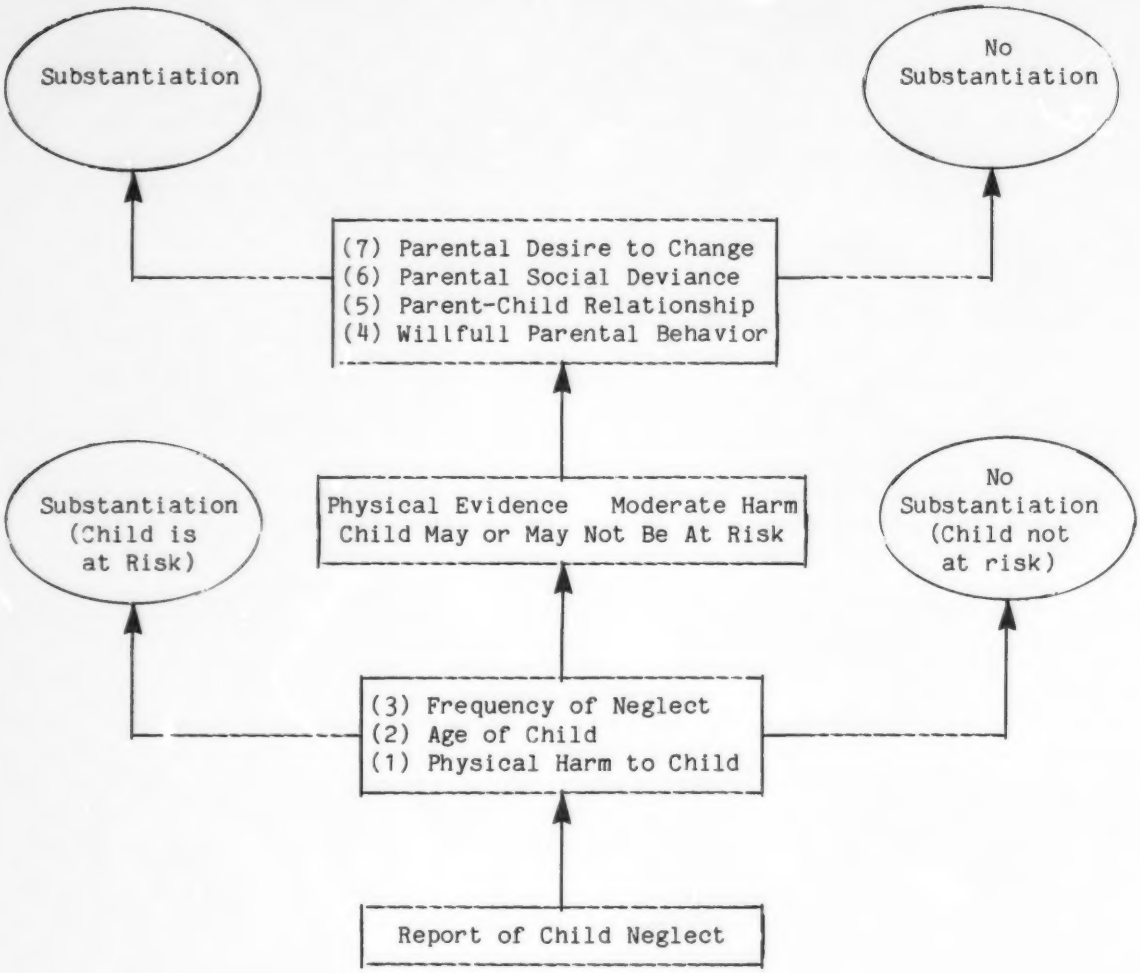
If labeling theory is a useful way of explaining the process of diagnosing neglect, it should help explain the problems cited at the beginning of this article. It can be argued that there does exist a set of consistent, mutually understood variables used by the "screeners" as decision-making criteria and that, when presented with a range of cases having different combinations of these variables, there will be general agreement concerning which cases constitute neglect.

Exploratory Phase of the Study

To obtain an initial identification of the factors child protective workers use, it was necessary to begin with an exploratory study. Semi-structured taped interviews were held with 12 workers, 10 of whom supervised child neglect investigators. They were asked to describe the process and factors that workers use in making decisions. Although most said they found it difficult to describe their method, the author's content analysis of their responses indicated a consensus.

The diagnostic process they conceptualized is a decision tree with two principal decision points (see Figure 1). The first step occurs during the earliest part of the investigation when the worker is gathering "hard" data to determine whether the child's life is in danger. This decision is made by assessing the relationship between the degree of physical harm observed, the age of the child, and the frequency of the alleged parental behavior. There was a high level of agreement among interviewed workers that from 40% to 50% of all decisions are made at this point. In other words, approximately half of the cases are decided according to physical evidence that the child is, or is not, physically safe.

FIGURE 1
HYPOTHESIZED DECISION MAKING PROCESS IN CASES OF CHILD NEGLECT


Substantiation
No Substantiation
(7) Parental Desire to Change
(6) Parental Social Deviance
(5) Parent-Child Relationship
(4) Willfull Parental Behavior
Substantiation (Child is at Risk)
Physical Evidence Moderate Harm Child May or May Not Be At Risk
No Substantiation (Child not at risk)
(3) Frequency of Neglect
(2) Age of Child
(1) Physical Harm to Child
Report of Child Neglect

The second decision point occurs when presenting physical evidence is unclear; the workers decide that there is some moderate harm and, therefore, the child may or may not be at risk. Because they find it impossible to make a definitive judgment, the workers must decide what degree of risk exists. Workers refer to these as the "gray area" cases. The second step, they believe, requires the consideration of abstract factors. Although different terms were mentioned, the author classified them into the following four concepts and defined them as follows:

1. Willful Behavior of Parent: No or Yes
   No = Parent(s) do not have the financial, intellectual, or emotional ability to provide adequate care and are, therefore, not deliberately harming the child.
   Yes = Parent(s) do have the financial, intellectual, and emotional ability to provide adequate care and are, therefore, willfully harming the child.

2. Parent-Child Relationship: Postive or Negative
   P = Parent(s) view child as inherently good, as having a separate identity, and as having needs that can be met.
   N = Parent(s) view child as inherently bad, are unable to separate the child's identity from their own, and feel unable to meet the child's needs.

3. Parental Social Deviance: Low or High
   Low = Parent(s) are law-abiding citizens and generally conform to community standards or adult conduct.
   High = Parent(s) exhibit an incidence of criminal activity, or extreme social isolation, or self-destructive behavior such as alcoholism or drug abuse.

4. Parental Desire to Change Behavior: Yes or No
   Yes = Parent(s) exhibit a positive attitude toward investigator, admit existence of problem, and/or ask for help.
   No = Parent(s) are unresponsive or negatively responsive to investigator, with a high level of denial, hostility, or passivity.

The findings of the exploratory study, then, seemed to be consistent with deviance and labeling theory. Seven factors are used in making decisions. The first three are concrete variables sufficiently observable to make a judgment in 50% of the cases. See Figure 1. The concrete variables are (1) physical harm to child, (2) age of child, (3) frequency of neglect. Using these three variables, 50% of cases are either substantiated or not substantiated immediately. These cases are clearly trivial, or so serious that the focus is entirely on the act itself and the resulting condition of the child. It is unnecessary to consider the characteristics of the parent. In the other half of the cases, however, the process focuses on parents' motivation, capabilities, and history.

After the first phase described above, an analogue experiment was undertaken to test the hypothesis that a decision to substantiate is associated with the abstract factors in descending order of influence (see Figure 1): (4) parent's neglecting behavior is willful, (5) parent has a poor relationship with the child, (6) parent's behavior is socially deviant, (7) parent shows no desire to change his or her behavior.

Experimental Phase of the Study

Methodology

The subjects were full-time protective service workers (N = 73) in eight urban and rural public child welfare offices in four midwestern states. The questionnaire was administered by either the author (five offices) or the workers' supervisors (three offices).

A repeated-measures analogue experimental design was employed. Although analogue studies are sometimes criticized for biases resulting from subjects being asked to make decisions without commitment, such biases, if any, would

not be expected to influence the relationships being examined here. The questionnaire was two pages in length; the first page presented the subjects with the following analogue:

Case Description

> An alleged case of child neglect has been reported in your office - the local office of the state child protection agency. You are assigned to investigate the case and you proceed to the address given in the report. You are admitted to the home and initiate the investigation. After observing the child, the home, and interviewing the parent(s), your initial determination is: (1) the child is not in an immediate life-threatening situation, and (2) the case does not represent a trivial or malicious report. You do decide that, given the age of the child and the frequency of the neglectful behavior, this is a case of moderate neglect. In other words, you have some genuine concern for the child but you do not believe that (s)he is currently and seriously at risk.
>
> You must file a court report during the next three days in which you either substantiate the allegation or do not. To make this decision you return to the home several times and collect additional information about the case.

The four abstract factors were then listed as above, and the caseworker was asked to consider them singly and in combination with one another in order to make the decision.

The second page gave the following instructions:

> Following each grouping of factors listed below, please place an S or NS on the blank line to indicate whether you would Substantiate (S) or Not Substantiate (NS) the report. Remember, this is a case of "moderate" physical neglect.

Sixteen cases were then presented that included the sixteen possible combinations of the four factors. To ensure that case order and factor did not confound the results, a counterbalanced design across cases and factors was employed. Each caseworker decided whether he or she would or would not substantiate each case.

Results

The author decided not to include serious life-threatening situations as an independent variable because of the evidence that caseworkers almost universally consider serious physical harm by itself sufficient to substantiate neglect. This study was designed to determine what other factors are sufficient and/or necessary to substantiate neglect when the physical condition of the child is judged to represent something less than life-threatening. Table 1 shows that approximately one-fifth of the workers decided that moderate physical harm alone was sufficient to substantiate neglect: in effect, that the law requires substantiation whenever there is evidence of any physical harm. In other words, moderate harm to the child constituted neglect even if these workers felt the parent was not willfully neglectful, had a positive relationship with the child, was low on deviance, and desired to change his or her negative behavior.

TABLE 1
Moderate Physical Harm as a Determinant of Workers' Decision to Substantiate Child Neglect

	N	%
Moderate physical harm alone was sufficient to substantiate	15	21%
Moderate physical harm was necessary but not sufficient	57	78%
No decision to substantiate unless harm was serious	1	1%
TOTAL	73	100%

Almost four-fifths of these respondents, however, considered moderate physical harm as a necessary but not sufficient criterion for substantiation. They indicated they would substantiate only if the neglect was willful, or if the relationship with the child was negative, or if the parent's deviant behavior was high, or if the parent showed no motivation to change his or her behavior, or some combination of these four. When all four subjective factors were present in their negative form and in combination with moderate harm, all but one of the caseworkers indicated a decision to substantiate. This one respondent refused to substantiate neglect for any of the 16 cases and stated that serious harm is the only justification for substantiation.

With 73 subjects and 16 cases, there were 1168 decisions. Given the specified conditions on a moderate level of physical harm, more than two-thirds of the total decisions across all cases were to substantiate. These data are presented in Table 2; they suggest that willful parental behavior and poor parent-child relationship were most influential in worker's decisions to substantiate, with deviant parental behavior and no desire to change having

considerably less influence. For example, in the eleventh analogue case, both of the latter two factors brought about fewer sustantiations (48%) than either the first (64%) or the second factor (50%) alone.

The most important data in Table 2 concern the first two factors. The only cases a majority of workers failed to substantiate were those in which the parents were not willfully harming the child or there was not a positive parent-child relationship. Put another way, the combination of willful behavior and negative parent-child relationship appeared to be the strongest determinants of substantiation. Furthermore, the majority of workers substantiated cases based on either of these factors alone, and the percentage of substantiated decisions consistently increases as additional negative factors are added.

TABLE 2
Percentage of Substantiations in Cases of Child Neglect Where Physical Harm Is Moderate and Negative Subjective Factors Are Present

	Presence of Negative Subjective Factor					
Case	Willful Parental Behavior	Poor Parent-Child Relationship	Deviant Parental Behavior	No Desire to Change	% of Total Decisions	
1	X	X	X	X	97	
2	X	X	X		96	
3	X	X		X	95	
4	X		X	X	88	
5		X	X	X	86	
6	X	X			82	
7	X		X		79	
8	X			X	79	
9		X	X		68	
10		X		X	68	
11			X	X	48	disagreement
12	X				64	
13		X			50	
14			X		38	
15				X	29	
16					19	

Proportion of decisions substantiated = 795/1168 (68%)

To confirm these results and ascertain the relative strength of each of the factors to influence a worker toward substantiation, the data were analysed with chi square and phi. Table 3 indicates that all four factors are significantly associated with a decision to substantiate: the first factor (willful behavior) displays the strongest relationship (0 = .364) and the fourth factor (desire to change) the weakest (0 = .121). Since the four independent variables are uncorrelated with one another, the explained variance of the dependent variable (Phi^2) is additive. Table 3 shows that the four factors explain almost one-fourth (23.7%) of the variance in deciding whether to substantiate.

TABLE 3
The Strength of Association Between Workers' Decision to Substantiate Child Neglect and Each of the Four Hypothesized Influences

	Proportion Substantiated	Chi Square	Phi	Phi^2
1. Parental neglect is willfull	497/584 (85%)	154.5*	.364	.132
2. Parent-child relationship is poor	470/584 (80%)	81.6*	.264	.069
3. Parental deviance is high	439/584 (75%)	26.48*	.151	.022
4. Parent(s) do not indicate a desire to change behavior	431/584 (74%)	17.15*	.121	.014
All four of the above	71/73 (97%)			.237
None of the above	14/73 (19%)			

* One should be cautious in interpreting these large Chi Square values since each of the 73 subjects made 16 decisions. Thus, there are not 1168 completely independent variables.

Finally, Table 2 offers another interesting observation concerning the issue of consistency in decision making. As was noted above, it is often charged that there is a wide variation in decision making among individual workers, child protection offices, and state departments of human services. One of the difficulties in assessing this charge lies in establishing just what is "consistency" in decision making. Logic and experience lead this writer to expect that more than a majority of workers should be able to agree on a diagnosis, but to regard total unanimity as unrealistic. Therefore, as a criterion for inconsistency, let us say that the range between 33% and 66% represents substantial disagreement about the appropriate decision. In other words, if at least two-thirds of the sample can agree either to substantiate or not substantiate there is agreement. As inspection of Table 2 shows, there is

agreement on 12 (75%) of the cases. Of the 4 cases about which there was substantial disagreement, 3 have only a single negative factor, although case No. 12 (willful behavior) comes very close to agreement. This finding was confirmed by subjecting the data to an analysis of variance (one-way ANOVA). When taking the mean number of substantiations by office, there was not a significant difference among offices in the same state or among different states. It can be concluded from this that there existed among these workers a moderate level of agreement about what constitutes neglect as indicated by the similarity of their decisions across the 16 cases.

This assertion must be qualified, however. The fact that one group of workers at one point in time showed a certain level of agreement is not particularly useful information. Until it is possible to explain a larger portion of the variance, and hence predict decision-making outcomes, the diagnostic process will not be well understood.

Discussion

This study extended to neglect the question that was applied to abuse by Craft et al. (1980) - namely, what factors do child protection workers actually use in making the initial decision to substantiate. This line of research is useful for beginning to assess the accuracy of the charges leveled against the child protective system and to understand how the diagnostic system functions. Better understanding identifies options for improvement.

The study findings seem to confirm the use of abstract factors in decision making when there is an absence of evidence that the child has been seriously harmed. In these situations, workers did make judgments by using the abstract concepts of "will and "relationship." In actual practice, whether the concepts are tied to concrete referents is a matter of speculation and can be assessed only by another research design. What labeling theory asserts, however, is that agents of social control do rely on a set of constructs that serve to filter out numerous variables. The speculation is that workers, given small amounts of time and a large number of cases, do try to use a heuristic that is efficient.

Why do outsiders perceive disagreement among workers? Although highly speculative, the explanation may lie in the following direction. Legislation does not concretely prescribe the boundary between normal and deviant parenting behavior. Workers must therefore gauge the community's prevailing sentiments and make assumptions concerning the fit between law and norms. Working together over time, workers develop common assumptions about how to define this boundary. Because these assumptions remain almost wholly implicit, and because they fear public controversy in making them explicit, workers develop a high level of mutual, tacit understanding based on idiosyncratic language and symbols. If this explanation is even partially accurate, it is no wonder that it is difficult for outsiders to understand how workers make decisions and why outsiders conclude, therefore, that workers are not consistent in what they do.

The objective of this line of research is, of course, to determine whether there is a commonly used heuristic and to identify its independent variables. Although this study does not achieve this objective, it does make a start.

The first contribution toward this end is the fact that the workers displayed an unexpectedly high level of agreement when confronted with the sixteen analogues, with two variables leading to agreement among four-fifths of the workers studied. If, with replication and repeated measures, a high level of consistent agreement is found, it will be possible to assume that workers do use a mutually accepted heuristic, and that individual bias or emotionalism is not a major determinant in decision making.

If there is a common pattern and if measurement error can be held to a minimum, it should be possible to identify the operating variables. This study accounted for 24% of the variance; a good outcome for an initial study when it is realized that a recent model for predicting abuse found an explained variance of 23.8% (Daley and Piliavin 1982). Nevertheless, there is much variance yet to be explained. Some may be accounted for by variables disregarded in this study: age of child, family income, SES, and so forth. Some may be accounted for by abstract constructs not yet identified. Finally, it is certainly possible that a great deal of variance may be due to individual variation based on subjective bias.

Whatever the findings of further empirical research, however, teachers, doctors, and other professionals as well as the general public will often continue to perceive child protection workers as incompetent, biased, and unfair until consideration is given to making criteria explicit, however difficult this may be. State law revision could establish serious demonstrable harm as the only criterion justifying state intervention, or state agencies could concretize their abstract standards concerning adequate parental behavior by using behaviorally based screening instruments such as a shortened CLL (Polansky et al. 1978). Either action would make criteria more explicit and thus improve the public's understanding of child neglect - a desirable goal in times of scarce resources.

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